

24040

.NOTIFICATION OF ESTABLISHMENT OR CANCELLATION  
OF OFFICIAL COVER BACKSTOP

DATE

FILE NO.

28 DECEMBER 1977

3190

TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION, OP		SS NUMBER 069-26-3138	RETURN TO CIA
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION, OP		EMPLOYEE NUMBER 007667	Background Use Only Do Not Reproduce
	<input checked="" type="checkbox"/> CHIEF, ATTN: LA (OPERATING COMPONENT FOR ACTION)		ID CARD NUMBER	
REF.	RETIREMENT		OFFICIAL COVER	ESTABLISHED
STATUS	<input checked="" type="checkbox"/> STAFF	<input type="checkbox"/> CONTRACT	<input checked="" type="checkbox"/> CANCELLED	CONTINUED
SUBJECT	BUSTOS-VIDELA, CHARLOTTE Z.			
UNIT				

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER (BLOCK RECORDS)	CANCELLATION OF OFFICIAL COVER (UNBLOCK RECORDS)		
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE <u>BOD</u>	EFFECTIVE DATE:		
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR <u>TDY</u> OTHER (Specify)	FORM 3254 <u>W-2 TO BE ISSUED</u> (RRB 20-7)		
<input checked="" type="checkbox"/> SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>0</u> (RRB 20-7)	SUBMIT FORM 642 IMMEDIATELY TO CHANGE TELEPHONE LIMITATION CATEGORY TO CATEGORY <u>0</u> (RRB 20-7)		
<input checked="" type="checkbox"/> FORM 3254 <u>W-2 TO BE ISSUED</u> (RRB 20-11)	EAA: CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/> RETURN ALL OFFICIAL DOCUMENTATION TO CCS		
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (RR 240-2e)	DO NOT WRITE IN THIS BLOCK -		
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (RR 240-2e)			
<input checked="" type="checkbox"/> EAA. CATEGORY I <input type="checkbox"/> CATEGORY II <input type="checkbox"/>			
<input checked="" type="checkbox"/> SUBMIT FORM 2688 FOR <u>ACT</u> HOSPITALIZATION CARD			

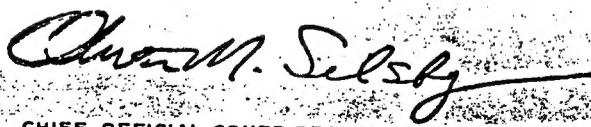
## REMARKS AND/OR COVER HISTORY

SUBJECT WILL BE DENIED FOR ENTIRE PERIOD OF EMPLOYMENT EXCEPT FOR US GOVERNMENT  
APPLICATIONS.

DISTRIBUTION:  
COPY 1 - CD/TRB OR CPD CONTROL  
COPY 2 - OPERATING COMPONENT  
COPY 3 - OS/SRD  
COPY 4 - OC/DO/TFB  
COPY 5 - CCS-FILE

VS/TW

-sp


  
CHIEF, OFFICIAL COVER BRANCH, CENTRAL COVER STAFF